1406074

FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number:
Expires:
Estimated average burden
hours per response



FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SE	C USE ON	ĹY
Prefix		Serial
DA	E RECEI	VED

Name of Offering (☐ check if this is an amendment and name has chan	ged, and indicate change.)
CREA-MA Reorganization Trust Class A Preferred Units	AN DECEMBER CO.
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑	Rule 506 ☐ Section 4(6) ☐ ULOE
Type of Filing: ☑ New Filing ☐ Amendment	1 0 C 2007
A. BASIC II	DENTIFICATION DATA JUL 0 0 2001
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has change	d, and indicate change.)
CREA-MA Reorganization Trust	
Address of Executive Offices (Number	and Street, City, State, Zip Code) Telephone Number (Including Area Code)
One Financial Plaza, Suite 1700, Hartford, Connecticut 06103	(860) 509-2240
Address of Principal Business Operations (Number	and Street, City, State, Zip Code) Telephone Number (Including Area Code)
(if different from Executive Offices)	PROCESSED
Brief Description of Business	
Investments in real estate assets	> JUL 1 2 2007
Type of Business Organization	THOMASON
☐ corporation ☐ limited partnership, alrea	dy form UNSON ☑ other (please specify): statutory trusts
☐ business trust ☐ limited partnership, to be	formed INANCIAL
	onth Year
F	
Actual or Estimated Date of Incorporation or Organization:	J 9 U 6 ⊠ Actual □ Estimated
Jurisdiction of Incorporation or Organization: (En	nter two-letter U.S. Postal Service abbreviation for State:
•	for Canada; FN for other foreign jurisdiction)
Name of Issuer (check if this is an amendment and name has change CREA-MA Reorganization Trust Address of Executive Offices (Number One Financial Plaza, Suite 1700, Hartford, Connecticut 06103 Address of Principal Business Operations (Number (if different from Executive Offices) Brief Description of Business Investments in real estate assets Type of Business Organization corporation limited partnership, alreation limited partnership, to be one of the partnership Mactual or Estimated Date of Incorporation or Organization: Jurisdiction of Incorporation or Organization: (En	and Street, City, State, Zip Code) Telephone Number (Including Area Code) (860) 509-2240 Telephone Number (Including Area Code) PROCESSED dy for THOMSON other (please specify): statutory trusts formed Nancial Onth Year Description: Actual Estimated Inter two-letter U.S. Postal Service abbreviation for State:

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

				A. BASIC IDE	ENTIFICATION DATA	<u></u>					
2.	Ente	er the information requ	ested for the follo	owing:							
	•	• Each promoter of the issuer, if the issuer has been organized within the past five years;									
	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;										
	• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and										
	•	Each general and mar	aging partner of	partnership issuers.							
Chec	ck B	ox(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full	Nam	e (Last name first, if in	dividual)								
Cor	ners	tone Real Estate Advi	sers LLC (Trus	tee)							
Busi	iness	or Residence Address	(Number and St	reet, City, State, Zip Cod	le)						
One	Fin	ancial Plaza, Suite 170	0, Hartford, Co	nnecticut 06103							
Chec	ck B	ox(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full	Nam	e (Last name first, if in	dividual).								
Busi	iness	or Residence Address	(Number and St	reet, City, State, Zip Cod	le)						
Chec	ck B	ox(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full	Nan	e (Last name first, if in	dividual)								
Busi	iness	or Residence Address	(Number and St	reet, City, State, Zip Cod	le)	_					
Chec	ck B	ox(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full	Nam	e (Last name first, if in	dividual)			•					
Busi	iness	or Residence Address	(Number and St	reet, City, State, Zip Cod	de)	·::					
Chec	ck B	ox(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full	Nam	e (Last name first, if in	dividual)								
Busi	iness	or Residence Address	(Number and St	reet, City, State, Zip Cod	de)						
Chec	ck B	ox(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full	Nam	e (Last name first, if in	dividual)								
Busi	iness	or Residence Address	(Number and St	reet, City, State, Zip Cod	de)						
Chec	ck B	ox(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full	Nam	e (Last name first, if in	dividual)								
Busi	iness	or Residence Address	(Number and St	reet, City, State, Zip Cod	le)						

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					B. IN	FORMA	TION AB	OUT OFFI	ERING		-			
													Yes	No
i.	Has the	issuer solo	l, or does tl	he issuer int	end to sell	, to non-a	ccredited in	vestors in t	his offeri	ıg?		••••		\boxtimes
Answer also in Appendix, Column 2, if filing under ULOE														
2. What is the minimum investment that will be accepted from any individual?									\$ 1,000					
										Yes	No			
3.								•••••						
4.	similar i an assoc broker o	remunerati ciated person or dealer.	on for solid on or agent If more that	citation of p of a broker	urchasers or dealer ersons to b	in connect registered	ion with sa with the S	e paid or give les of secure EC and/or verd persons of	ities in th vith a stat	e offering. e or states, l	If a person list the nam	to be liste ie of the	ed is	
Full Name	e (Last na	ame first, i	f individua	ıl)										
H & L E	quities, I	JLC												
Business	or Reside	ence Addre	ess (Numbe	er and Street	t, City, Sta	te, Zip Co	de)							
1175 Pea	chtree S	treet, N.E.	., 100 Colo	ny Square,	Suite 212	0, Atlanta	a, Georgia	30361-620	6					
Name of A	Associate	ed Broker e	or Dealer											
				cited or Inte								_		
(Che														
	[AL]	[AK]	(AZ)	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]☑	[GA]☑	[HI]	[ID]	
		[IN]	(IA)	[KS]	[KY]	[LA]	[ME]	[MD]☑	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]Ø	[ND]	[OH]	{OK]☑	[OR]	[PA]☑	
	[RI]	[SC]	[SD]	[TN]☑	[TX]☑	[UT]	[VT]	[VA]☑	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name	e (Last na	ame first, i	f individua	d)										
Business	or Reside	ence Addre	ess (Numbe	er and Stree	t, City, Sta	te, Zip Co	de)				•			
Name of A	Associate	ed Broker	or Dealer											
States in 3	Which Pe	erson Liste	d Has Solid	cited or Inte	ends to Sol	icit Purcha	asers							
													Il States	
(5.1.2	[AL]							[DE]					[ID]	
	(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	(MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name			f individua		1 1	,			·					
Business	or Reside	ence Addre	ess (Numbe	er and Stree	t, City, Sta	te, Zip Co	de)		·					
Name of A	Associate	ed Broker	or Dealer											
States in V	Which Pe	erson Liste	d Has Soli	cited or Inte	nds to Sol	icit Purcha	asers						·······	
(Che	ck "All !	States" or	check indiv	idual States	s)	,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					•••••	A	II States	
•	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, if necessary.)

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Type of Security		Aggregate	Ar	nount Already
		Offering Price		Sold
Debt				-0-
Equity	. <u>\$</u>	-0-	<u>s</u>	-0-
. Common Preferred				
Convertible Securities (including warrants)	. <u>S</u>	-0-	<u>\$</u>	-0-
Partnership Interests	. <u>\$</u>	-0	<u>s</u>	-0-
Other (Specify) Class A Preferred Units	. <u>\$</u>	\$125,000	<u>s</u>	125,000
Total	. <u>\$</u>	\$125,000	<u>\$</u>	125,000
Answer also in Appendix, Column 3, if filing under ULOE.				
Enter the number of accredited and non-accredited investors, who have purchased securities in this offering an the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
				Aggregate
		Number	_	ollar Amoun
		Investors	(of Purchases
Accredited Investors	٠ _	125	<u>\$</u>	\$125,000
Non-accredited Investors		-0-	<u>\$</u>	0-
Total (for filings under Rule 504 only)		N/A	<u>s</u>	N/A
Answer also in Appendix, Column 4, if filing under ULOE.				
If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
Type of offering		Type of Security	D	ollar Amount Sold
Rule 505			<u>\$</u>	
Regulation A			<u>s</u>	
Rules 504	· _		<u>\$</u>	
Total			<u>s</u>	
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	i			
Transfer Agent's Fees		🗹	1 §	0-
Printing and Engraving Costs		<u> </u> [2	1 <u>\$</u>	0-
Legal Fees		<u>v</u>	1 <u>\$</u>	20,000
Accounting Fees		<u>F</u>	1 <u>\$</u>	··0-
Engineering Fees				-0-
Sales Commissions (specify finders' fees separately)				6,250
Other Expenses (identify) expense reimbursement - \$1,500; consulting fees - \$26,750				28,250
Total			- <u></u>] §	54,500

issuer." 5.	of the purposes shown. If the amou	ijusted gross proceeds to the issuer used or proposed to be used for each of any purpose is not known, furnish an estimate and check the beat the payments listed must equal the adjusted gross proceeds to the issestion 4.b above.	ox to					
				D	ayments to Officers, irectors, & Affiliates			yments to Others
	Salaries and fees			<u>\$</u>	-0-		<u>\$</u>	-0-
	Purchase of real estate			<u>\$</u>	-0-		<u>s</u>	-0-
	Purchase, rental or leasing and inst	allation of machinery and equipment		<u>\$</u>	-0-		<u>\$</u>	-0-
	Construction or leasing of plant but	ldings and facilities		<u>\$</u>	-0		<u>\$</u>	-0-
		cluding the value of securities involved in this offering that may be ecurities of another issuer pursuant to a merger)		<u>\$</u>	-0-		<u>\$</u>	-0-
	Repayment of indebtedness			<u>\$</u>	-0-		<u>s</u>	-0-
	Working capital			<u>s</u>	-0-	☑	<u>\$</u>	70,500
	Other (specify):			<u>\$</u>	-0-		<u>\$</u>	-0-
	Column Totals		. 🗆	<u>\$</u>	-0-	✓	<u>\$</u>	70,500
	Total Payments Listed (column total	als added)			<u>\$ 70,500</u>		-	
		D. FEDERAL SIGNATURE	•					
constitu	tes an undertaking by the issuer to fur	gned by the undersigned duly authorized person. If this notice is filmish to the U.S. Securities and Exchange Commission, upon written investor pursuant to paragraph (b)(2) of Rule 502.	ed ur requ	ider F iest o	Rule 505, the f its staff, the	foll e inf	owing ormati	signature ion
•	Print of Type) MA Reorganization Trust	Signature Date July 2	, 200	7				
Name o	f Signer (Print or Type)	Title of Signer (Print or Type)	i					
4 miluon	v C. Williams	Executive Vice President of Cornerstone Real Estate Ad	lvise	rs Ll	C, the trus	tee o	f the	lssuer

END

ATTENTIO	•
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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)